



MISSOURI DEPARTMENT OF HEALTH AND SENIOR SERVICES
2005-2006 SUMMARY REPORT OF IMMUNIZATION STATUS OF
MISSOURI PUBLIC, PRIVATE, AND PAROCHIAL SCHOOL CHILDREN

This completed CD-31 form must be forwarded to the
Missouri Department of Health and Senior Services
Section for Communicable Disease Prevention
P.O. Box 570
Jefferson City, MO 65102-0570
by OCTOBER 15, 2005.

Mailing Address Correct: <input type="checkbox"/> Yes <input type="checkbox"/> No (If no, please make corrections on label)
Phone:
Email Address:

MAILING LABEL

Prepared by:	Date:	Approved By (Superintendent or School Administrator):
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2005-2006	Grade Level													Other or Special Needs
	K	1	2	3	4	5	6	7	8	9	10	11	12	
Total Number of Students Enrolled														
DTaP/DTP/DT/Td	4+ doses	4+ doses	4+ doses	4 doses	4 doses	4 doses	4 doses	3 doses	3 doses	3 doses	3 doses	3 doses	3 doses	
Students fully immunized														
Students in progress (See ACIP Schedule)														
Students with medical exemption														
Students with religious exemption														
Students noncompliant with immunization records *														
Students noncompliant without immunization records *														
Polio	3+ doses	3+ doses	3+ doses	3+ doses	3+ doses	3+ doses	3+ doses	3+ doses	3+ doses	3+ doses	3+ doses	3+ doses	3+ doses	
Students fully immunized														
Students in progress (See ACIP Schedule)														
Students with medical exemption														
Students with religious exemption														
Students noncompliant with immunization records *														
Students noncompliant without immunization records *														
MMR (Measles, Mumps, Rubella)	2 doses	2 doses	2 doses	2 measles, 1 mumps, 1 rubella	2 measles, 1 mumps, 1 rubella	2 measles, 1 mumps, 1 rubella	2 measles, 1 mumps, 1 rubella	2 measles, 1 mumps, 1 rubella	2 measles, 1 mumps, 1 rubella	2 measles, 1 mumps, 1 rubella	2 measles, 1 mumps, 1 rubella	2 measles, 1 mumps, 1 rubella	2 measles, 1 mumps, 1 rubella	
Students fully immunized														
Students in progress (See ACIP Schedule)														
Students with medical exemption														
Students with religious exemption														
Students noncompliant with immunization records *														
Students noncompliant without immunization records *														
Hepatitis B	3 doses	3 doses	3 doses	3 doses	3 doses	3 doses	3 doses	3 doses	3 doses	3 doses	3 doses	3 doses	3 doses	
Students fully immunized														
Students in progress (See ACIP Schedule)														
Students with medical exemption														
Students with religious exemption														
Students noncompliant with immunization records *														
Students noncompliant without immunization records *														
Varicella	1 dose or proof of disease													
Students fully immunized														
Students with proof of disease														
Students with medical exemption														
Students with religious exemption														
Students noncompliant with immunization records *														
Students noncompliant without immunization records *														
Students with vaccine series complete														
* DENOTES NEED TO COMPLETE IMMP-10 REPORT														